AMEN	Docket No. 66138-0005					
Application 10/735,392-Co		Filing December		Examiner M. Safavi	Art	
		 	12, 2005	ivi. Salavi	36	
pplicant(s): Hate	em Hannawa e	et al.	***************************************			
nvention: RE-US	ABLE NON-MI	ETALLIC CON	STRUCTION	FORMING SYSTE	:M	
		THE COMMI				
Transmitted here The fee has been				• •		
		CLAIM	S AS AMENI	DED		
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		
Total Claims	8	- 32 =	0	x		
Independent Claims		- 3 =		×		
Multiple Depend	lent Claims (ch	eck if applicabl	le)			
		Martin				
Other fee (pleas	e specify): E	Extension for res	ponse within fi	irst month	60.0	
TOTAL ADDIT	ONAL FEE FO	OR THIS AME	NDMENT:		60.0	
Large Entity				x Small Entity		
No additiona	Il fee is require	d for this ame	ndment.	- 		
X Please charg	ge Deposit Acc	count No.	18-0013 iı	n the amount of \$	60.00	
	copy of this she			_		
A check in th	ne amount of \$		to cover	the filing fee is enc	losed.	
Payment by	credit card. Fo	orm PTO-2038	is attached.			
X The Director	is hereby auth	norized to char	ge and credit	: Deposit Account N	o. 18-0013	
	below. A dup				***************************************	
x Credit a	ny overpaymer	nt.				
x Charge a	any additional fil	ing or applicatio	n processing	fees required under (37 CFR 1.16 and 1	
/Michael B. Ste				Dated:	May 23, 2007	
Michael B. Stev Attorney/Agent		018				
, ,						
RADER, FISHN 39533 Woodwa		IN FLLO				
Suite 140 Bloomfield Hills	Michigan 49	304				
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(248) 594-0633		00+				
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		-				

PTO/SB/17 (05-07)
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	L	Complete if Known										
Fees pursuant to 1	18).	Application Num	nber	0/735,392-Conf. #8983								
l FEE	ETRANSI		Filing Date Decei		December 12,	cember 12, 2003						
	For FY 20	Į.	First Named Inv	entor	Hatem Hannawa							
 1			Examiner Name M. Safavi									
X Applicant claims small entity status. See 37 CFR 1.27				Art Unit		3673						
TOTAL AMOU	NT OF PAYMENT	(\$) 60.00		Attorney Docket No. 66138-0005								
METHOD OF PAYMENT (check all that apply)												
Check Credit Card Money Order None Other (please identify):												
x Deposit Account Deposit Account Number: 18-0013 Deposit Account Name: Rader, Fishman & Grauer PLLC												
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)												
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee												
X Charge any additional fee(s) or underpayments of X Credit any overpayments												
FEE CALCUI												
1. BASIC FILIN	G, SEARCH, AND EX	AMINATION FEES	· · · · ·									
	FIL		SEA	RCH FEES	EXAMI	NATION FEES						
Application Ty	/pe Fee (\$)	Small Entity Fee (\$) Fe	e (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees	Paid (\$)				
Utility	300		500	250	200	100						
Design	200	100 1	00	50	130	65						
Plant	200	100 3	300	150	160	80						
Reissue	300	150 5	00	250	600	300						
Provisional	200	100	0	0	0	0						
2. EXCESS CLAIM FEES Small Entity												
Fee (\$) Fee (\$)												
	r 20 (including Keissu int claim over 3 (inclu	•				50	25					
1					200	100						
Multiple dependent claims				_!.d (#)	3.5	indefinite Ponnice i	360	180				
Total Claims			ee P	aid (\$)		ultiple Depende se (\$) F	ee Paid (
	ber of total claims paid for,			***************************************	<u> </u>	<u> </u>	ee raiu (ត				
Indep. Claims	Extra Claims	Fee (\$) F	ee P	aid (\$)								
x =x												
HP = highest number of independent claims paid for, if greater than 3.												
3. APPLICATIO												
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50												
sheets or fr	action thereof. See 35	U.S.C. 41(a)(1)(G)	and 3	; is \$230 (\$123 i) 37 CFR 1.16(s).	or sman e	mily) for each ac	iditional 5	U				
Total Sheet				iditional 50 or frac	tion therec	of Fee (\$)	Fee	Paid (\$)				
- 100 = /50 = (round up to a whole number) x =												
4. OTHER FEE(S) Fees Paid (\$)												
Non-English Specification, \$130 fee (no small entity discount)												
Other (e.g., late filing surcharge): 2251 Extension for response within first month 60.00												
SUBMITTED BY												
Signature	/Michael B. Stewa	rt/		Registration No. (Attorney/Agent)	36,018	Telephone	(248) 59	4-0633				
Name (Print/Type)	Michael B. Stewar			Date	May 23							